

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

PAC TO THE FUTURE

ADDRESS (number and street)

607 14th Street, NW

Suite 800

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00344234

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 1

2 4

2 0 0 9

through

1 2

3 1

2 0 0 9

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Paul Pelosi

Signature of Treasurer

Electronically Filed by Paul Pelosi

Date

0 1

2 9

2 0 1 0

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 34

Write or Type Committee Name  
PAC TO THE FUTURE

Report Covering the Period:

From:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	66275.29
(b) Cash on Hand at Beginning of Reporting Period .....	94607.66	
(c) Total Receipts (from Line 19) .....	89500.00	655095.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	184107.66	721370.85
7. Total Disbursements (from Line 31) .....	58251.13	595514.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	125856.53	125856.53
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 34

Write or Type Committee Name  
PAC TO THE FUTURE

Report Covering the Period:

From:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	53000.00	205800.00
(ii) Unitemized .....	0.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	53000.00	206050.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	30000.00	430000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	83000.00	636050.00
12. Transfers From Affiliated/Other Party Committees .....	6500.00	18545.56
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	89500.00	655095.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	89500.00	655095.56

## DETAILED SUMMARY PAGE

of Disbursements

4 / 34

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	14251.13	125249.62	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	14251.13	125249.62	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44000.00	464000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	5000.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5000.00	
29. Other Disbursements.....	0.00	1264.70	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	58251.13	595514.32	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	58251.13	595514.32	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 34

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	83000.00	636050.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	83000.00	631050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14251.13	125249.62
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14251.13	124749.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
 PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)  
 Norman Brownstein

Mailing Address 410 17th Street  
 22nd Floor

City State Zip Code  
 Denver CO 80202

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Brownstein Hyatt Farber  
 Schreck

Occupation  
 Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 2 4 / 2 0 0 9

Transaction ID: C2791430

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Scott A. Keeney

Mailing Address 4020 Ridgeview Lane

City State Zip Code  
 Hurricane WV 25526

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insu-  
 rance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814710

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
 Cindy Furer

Mailing Address 9220 Fostoria Court

City State Zip Code  
 San Diego CA 92127

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insu-  
 rance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799590

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)  
 Tyrone Conard

Mailing Address 15581 Andover Heights Drive

City State Zip Code  
**Woodbridge VA 22193**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 2 5 / 2 0 0 9**

**Transaction ID: C2799610**

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Scott E. Sonnenberg

Mailing Address 236 Leaf Lane

City State Zip Code  
**Alabaster AL 35007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 2 5 / 2 0 0 9**

**Transaction ID: C2799620**

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
 Richard W. Altig, Jr.

Mailing Address 10025 111th Avenue, NE

City State Zip Code  
**Kirkland WA 98033**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 2 / 2 1 / 2 0 0 9**

**Transaction ID: C2814701**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)  
 Sam G. Lasala

Mailing Address 451 Northpark Drive  
 Suite C

City State Zip Code  
 Ridgeland MS 39157

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814711

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Rebecca J. Fairfax-Hancock

Mailing Address 12546 Walnut Ridge Place

City State Zip Code  
 Fishers IN 46038

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799601

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
 Heidi M. Diecedue

Mailing Address 1542 E. Tiffany

City State Zip Code  
 Gonzales LA 70737

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799611

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

John H. Szoka

Mailing Address 6332 Albervan Street

City State Zip Code  
**Shawnee KS 66216**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 2 5 / 2 0 0 9**

Transaction ID: C2799621

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Matthew Hogan

Mailing Address 245 Providence Drive

City State Zip Code  
**Covington GA 30016**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 2 5 / 2 0 0 9**

Transaction ID: C2799602

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Robert K. Olson, Jr.

Mailing Address 26561 W. Highland Drive

City State Zip Code  
**Channahon IL 60410**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 2 5 / 2 0 0 9**

Transaction ID: C2799612

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

Robert C. Liles

Mailing Address 6762 S. 73rd Circle

City

Omaha

State

NE

Zip Code

68127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814713

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Yaroslav Bitman

Mailing Address 223 Waterford Park Lane

City

Raleigh

State

NC

Zip Code

27615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814703

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Dustin W. Venekamp

Mailing Address 5885 Forest View Road  
Apt. 802

City

Lisle

State

IL

Zip Code

60532

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814853

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

Randy E. Teyssier

Mailing Address 2801 NW 173rd Street

City

Edmond

State

OK

Zip Code

73012

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799623

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Joshua B. Goodman

Mailing Address 8 Foley Road

City

Woburn

State

MA

Zip Code

01801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799593

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Matt Henderson

Mailing Address 110 West Orange Street

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2800283

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

Gary R. Bleier

Mailing Address 917 Windfield Place

City

Appleton

State

WI

Zip Code

54911

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814704

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Kathleen R. Loughran

Mailing Address 30-50 Whitestone Expressway, Suite

City

Flushing

State

NY

Zip Code

11354

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814714

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas B. Williams

Mailing Address 10246 SW 22nd Place

City

Davie

State

FL

Zip Code

33324

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814854

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

John W. Jatoft

Mailing Address 2169 Ward Drive

City

Walnut Creek

State

CA

Zip Code

94596

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799604

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Philip Prata

Mailing Address 43 Van Buren Street

City

Newark

State

NJ

Zip Code

07105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799614

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Elaina S. Bosco

Mailing Address 9378 Olive Boulevard  
Suite 301

City

Saint Louis

State

MO

Zip Code

63132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814705

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

Tim P. Matteson

Mailing Address 9620 George Bush Drive

City

McKinney

State

TX

Zip Code

75070

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814715

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

David Zophin

Mailing Address 101 Grouse Hill Road

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814855

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Steve Hartman

Mailing Address 3417 E. Norwood Circle

City

Mesa

State

AZ

Zip Code

85213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799595

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

James Logan

Mailing Address 5385 Shannamara Drive

City

Matthews

State

NC

Zip Code

28104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799605

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Diego Arangopuerta

Mailing Address 6301 Indian School Road, NE  
Suite 550

City

Albuquerque

State

NM

Zip Code

87110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2800285

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Amy L. Engrav

Mailing Address 125 Grand Falls

City

Conway

State

AR

Zip Code

72032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814706

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

A.L. Beth O'Connor

Mailing Address 1511 Crescent View

City

San Antonio

State

TX

Zip Code

78258

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814716

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

James M. Surace

Mailing Address 6615 Crossbow Court

City

North Royalton

State

OH

Zip Code

44133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814856

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Steven J. DiChiaro

Mailing Address 3337 Grenache Street

City

Greeley

State

CO

Zip Code

80634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799586

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

Sharon A. Manone

Mailing Address N89 W 15883 Main Street

City

Menomonee Falls

State

WI

Zip Code

53051

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799606

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Tyna Rehberg

Mailing Address 1153 Thistle Lane

City

Lebanon

State

OH

Zip Code

45036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799616

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Diego Aranguera

Mailing Address 6301 Indian School Road, NE  
Suite 550

City

Albuquerque

State

NM

Zip Code

87110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2800286

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)

Lionel A. Kaplan

Mailing Address 671 Rosedale Road

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Joseph A. Kaplan & Sons

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

Transaction ID: C2791467

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Eric J. Giglione

Mailing Address 38 Windsor Drive

City

Little Silver

State

NJ

Zip Code

07739

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814707

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Robert E. Shafer

Mailing Address 102 Rose Garden Lane

City

Goodlettsville

State

TN

Zip Code

37072

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814717

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)  
 Timothy R. McAdams

Mailing Address 3909 Norway Lane

City State Zip Code  
 Bowie MD 20716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799607

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Mashantucket Pequot Tribal Nation

Mailing Address P.O. Box 3008

City State Zip Code  
 Manshantucket CT 06338

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 0 2 / 2 0 0 9

Transaction ID: C2807868

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
 Steve H. Greer

Mailing Address 43 Nocturne Woods Place

City State Zip Code  
 The Woodlands TX 77382

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814708

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

**A.**

Full Name (Last, First, Middle Initial)  
 Ryan J. Stenglein

Mailing Address 214 20th Street  
 Apt. A

City State Zip Code  
 Huntington Beach CA 92648

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

**Transaction ID: C2814718**

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
 Carla A. Miller

Mailing Address 751 Jacobs Mill Pond Road  
 Apt. 814

City State Zip Code  
 Elgin SC 29045

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 2 5 / 2 0 0 9

**Transaction ID: C2799608**

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
 Brenda K. Hadayia

Mailing Address 101 Iron Valley Drive

City State Zip Code  
 Lebanon PA 17042

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

**Transaction ID: C2814709**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

Latonya A. Tucker

Mailing Address 395 Autumn Creek Drive  
Apt. D

City State Zip Code  
Valley Park MO 63088

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2814789

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Christopher Hernandez

Mailing Address 3003 Douglas Avenue  
Unit 17

City State Zip Code  
Dallas TX 75219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799599

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Eric J. Neal

Mailing Address 1355 Woodside Drive

City State Zip Code  
Arnold MO 63010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Income Life Insu-  
rance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799609

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

Paul Rumbuc

Mailing Address 3570 Magnolia Court

City

Oakland

State

MI

Zip Code

48363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insu-  
rance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 5 / 2 0 0 9

Transaction ID: C2799619

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

53000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 34

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE**A.**Full Name (Last, First, Middle Initial)  
Real Estate Roundtable PACMailing Address 801 Pennsylvania Avenue  
Suite 720City State Zip Code  
Washington DC 20004FEC ID number of contributing  
federal political committee.**C** C00033779

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	3		2	0	0	9

Transaction ID: C2816330

Amount of Each Receipt this Period

5000.00

**B.**Full Name (Last, First, Middle Initial)  
Deloitte Federal PAC

Mailing Address PO Box 365

City State Zip Code  
Washington DC 20044-0365FEC ID number of contributing  
federal political committee.**C** C00211318

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	0	9

Transaction ID: C2809571

Amount of Each Receipt this Period

5000.00

**C.**Full Name (Last, First, Middle Initial)  
Sonnenschein, Nath & Rosenthal PACMailing Address 1301 K Street NW  
Suite 600 East TowerCity State Zip Code  
Washington DC 20005-3307FEC ID number of contributing  
federal political committee.**C** C00216127

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	9

Transaction ID: C2807867

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

15000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 34

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)  
Time Warner Cable Inc. Federal PAC

Mailing Address 901 F Street, NW  
Suite 800

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00431551

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 9

Transaction ID: C2816328

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Federal Express PAC

Mailing Address 942 S. Shady Grove Road

City State Zip Code  
Memphis TN 38120

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C2818279

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Medco Health Solutions PAC

Mailing Address 2350 Kerner Blvd.  
Suite 250

City State Zip Code  
San Rafael CA 94901

FEC ID number of contributing  
federal political committee.

**C** C00384362

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

Transaction ID: C2814219

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

30000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 34

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

Jared Polis Victory Fund

Mailing Address PO Box 1174

City

Springfield

State

VA

Zip Code

22151

FEC ID number of contributing  
federal political committee.

**C**

C00461913

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2815152

Amount of Each Receipt this Period

6500.00

**B.**

Full Name (Last, First, Middle Initial)

Jordanna Schutz

Mailing Address 2525 Arapahoe Avenue  
#E-4 P

City

Boulder

State

CO

Zip Code

80302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-Employed

Occupation

Entrepreneur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: C2819221

Amount of Each Receipt this Period

2700.00

[MEMO ITEM]

\*

**C.**

Full Name (Last, First, Middle Initial)

Stephen Schutz

Mailing Address PO Box 1046

City

La Jolla

State

CA

Zip Code

92038

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SPS Studios

Occupation

Publishing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 9

Transaction ID: C2819224

Amount of Each Receipt this Period

3800.00

[MEMO ITEM]

\*

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 34

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
 PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

Susan Schutz

Mailing Address PO Box 1046

City

La Jolla

State

CA

Zip Code

92038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SPS Studios

Occupation  
Publishing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 6 / 2 0 0 9

Transaction ID: C2819225

Amount of Each Receipt this Period

3800.00

**[MEMO ITEM]**

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

6500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

A.

Full Name (Last, First, Middle Initial)

Jennifer Crider

Mailing Address 3634 Gunston Road

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D202160

Date of Disbursement

12 / 28 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Solutions West

Mailing Address 601 Mississippi St

City San Francisco State CA Zip Code 94107-2936

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D202161

Date of Disbursement

12 / 28 / 2009

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Elavon Merchant Services

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D205252

Date of Disbursement

12 / 02 / 2009

Amount of Each Disbursement this Period

74.50

SUBTOTAL of Disbursements This Page (optional) .....

4074.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

A.

Full Name (Last, First, Middle Initial)

Jennifer Crider

Mailing Address 3634 Gunston Road

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D199154

Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

TD Bank

Mailing Address 605 14th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D200485

Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)

TD Bank

Mailing Address 605 14th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D203605

Date of Disbursement

12 / 29 / 2009

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional) .....

2530.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

<b>A.</b> Full Name (Last, First, Middle Initial) Carmela Clendening	<b>Transaction ID:</b> D201775 <b>Date of Disbursement</b>																				
Mailing Address 1390 Kenyon Street, NW, #404	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	8		2	0	0	9												
City Washington State DC Zip Code 20010	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Fundraising Consulting Services	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Solutions West	<b>Transaction ID:</b> D199156 <b>Date of Disbursement</b>																				
Mailing Address 601 Mississippi St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	9												
City San Francisco State CA Zip Code 94107-2936	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Strategic Consulting Services	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Perkins Coie LLP	<b>Transaction ID:</b> D200306 <b>Date of Disbursement</b>																				
Mailing Address 1201 Third Avenue Suite 4800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	9												
City Seattle State WA Zip Code 98101	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Legal & Accounting Services	<table border="1"> <tr> <td colspan="10">3035.45</td> </tr> </table>	3035.45																			
3035.45																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6035.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

**A.**

Full Name (Last, First, Middle Initial)

TD Bank

Mailing Address 605 14th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement

Merchant Service Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D199057

Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

111.18

**B.**

Full Name (Last, First, Middle Initial)

Carmela Clendening

Mailing Address 1390 Kenyon Street, NW, #404

City Washington State DC Zip Code 20010

Purpose of Disbursement

Fundraising Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D199158

Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1611.18

**TOTAL** This Period (last page this line number only) .....

14251.13

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 34

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

<b>A.</b> Full Name (Last, First, Middle Initial) Ciro Rodriguez for Congress	<b>Transaction ID:</b> D200290 <b>Date of Disbursement</b>
Mailing Address P.O. Box 14528	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 9</div> </div>
City San Antonio State TX Zip Code 78214	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name Ciro D. Rodriguez	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Walz for Congress	<b>Transaction ID:</b> D202220 <b>Date of Disbursement</b>
Mailing Address 630 N. River Front Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 9</div> </div>
City Mankato State MN Zip Code 56001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Tim Walz	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ciro Rodriguez for Congress	<b>Transaction ID:</b> D200291 <b>Date of Disbursement</b>
Mailing Address P.O. Box 14528	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 9 / 2 0 0 9</div> </div>
City San Antonio State TX Zip Code 78214	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name Ciro D. Rodriguez	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 34

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

A.

Full Name (Last, First, Middle Initial)  
Spratt for Congress

Mailing Address P.O. Box 830

City State Zip Code  
York SC 29745

Purpose of Disbursement  
Contribution

Candidate Name  
John M. Spratt, Jr.

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SC District: 05

Transaction ID: D202221

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
Harry Mitchell for Congress

Mailing Address P.O. Box 23748

City State Zip Code  
Tempe AZ 85285

Purpose of Disbursement  
Contribution

Candidate Name  
Harry E. Mitchell

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 05

Transaction ID: D200292

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
Harry Mitchell for Congress

Mailing Address P.O. Box 23748

City State Zip Code  
Tempe AZ 85285

Purpose of Disbursement  
Contribution

Candidate Name  
Harry E. Mitchell

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 05

Transaction ID: D200293

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**11000.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 34

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

<b>A.</b> Full Name (Last, First, Middle Initial) Pomeroy for Congress	<b>Transaction ID:</b> D202223 <b>Date of Disbursement</b>
Mailing Address P.O. Box 9336	<div> <div>12</div> <div>30</div> <div>2009</div> </div>
City Fargo State ND Zip Code 58106	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Earl L. Pomeroy Category/Type	<div>1000.00</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District: 01	
<b>B.</b> Full Name (Last, First, Middle Initial) John Hall for Congress	<b>Transaction ID:</b> D202224 <b>Date of Disbursement</b>
Mailing Address PO Box 469	<div> <div>12</div> <div>30</div> <div>2009</div> </div>
City Beacon State NY Zip Code 12508	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name John J. Hall Category/Type	<div>5000.00</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 19	
<b>C.</b> Full Name (Last, First, Middle Initial) Tim Bishop for Congress	<b>Transaction ID:</b> D202225 <b>Date of Disbursement</b>
Mailing Address PO Box 437	<div> <div>12</div> <div>30</div> <div>2009</div> </div>
City Farmingville State NY Zip Code 11738	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name Timothy Bishop Category/Type	<div>1000.00</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 01	

**SUBTOTAL** of Disbursements This Page (optional) .....

**7000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 34

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

A.

Full Name (Last, First, Middle Initial)  
John Callahan for Congress

Mailing Address PO Box 1386

City State Zip Code  
Bethlehem PA 18017

Purpose of Disbursement  
Contribution

Candidate Name  
John B. Callahan

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 15

Transaction ID: D202217

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)  
John Carney for Congress

Mailing Address P.O. Box 2162

City State Zip Code  
Wilmington DE 19899

Purpose of Disbursement  
Contribution

Candidate Name  
John Carney

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: DE District: 01

Transaction ID: D202218

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)  
Bill Owens for Congress

Mailing Address PO Box 1575

City State Zip Code  
Plattsburgh NY 12901

Purpose of Disbursement  
Contribution

Candidate Name  
William Owens

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: D202219

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

44000.00